

Attorney's Docket No.: 5333-4

# DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION SOLE OR JOINT

I, Giovanni Pagani, hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention titled:

## FIXED INCOME PERFORMANCE ATTRIBUTION

the specification of which is attached hereto.

I HEREBY STATE THAT I HAVE REVIEWED AND UNDERSTAND THE CONTENTS OF THE ABOVE-IDENTIFIED SPECIFICATION, INCLUDING THE CLAIMS.

I ACKNOWLEDGE THE DUTY TO DISCLOSE INFORMATION WHICH IS MATERIAL TO THE EXAMINATION OF THIS APPLICATION IN ACCORDANCE WITH TITLE 37, CODE OF FEDERAL REGULATIONS, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

(Number)	(Country)	(Day/Month/Year Filed)	Priority Claimed	
_____	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States applications listed below and, INsofar AS THE SUBJECT MATTER OF EACH OF THE CLAIMS OF THIS APPLICATION IS NOT DISCLOSED IN THE PRIOR UNITED STATES APPLICATION IN THE MANNER PROVIDED BY THE FIRST PARAGRAPH OF TITLE 35, UNITED STATES CODE, §112, I ACKNOWLEDGE THE DUTY TO DISCLOSE MATERIAL INFORMATION AS DEFINED IN TITLE 37, CODE OF FEDERAL REGULATIONS, §1.56(a) WHICH OCCURRED BETWEEN THE FILING DATE OF THE PRIOR APPLICATION AND THE NATIONAL OR PCT INTERNATIONAL FILING DATE OF THIS APPLICATION:

(Application Serial Number)	(Filing Date)	(STATUS: Patented, Pending, Abandoned)
_____	_____	_____
_____	_____	_____

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected herewith (List name and registration number).

(LIST SENIOR PATENT COUNSEL AND ATTORNEY HANDLING CASE WITH PATENT OFFICE REGISTRATION NUMBERS.)

Leslie Gladstone Restaino, Reg. No. 38,893

Seth H. Ostrow, Reg. No. 37,410

Matthew J. Marquardt, Reg. No. 40,997

Frederick Yu, Reg. No. 45,251

James W. Woods, Reg. No. 47,184

Robert L. Kovelman, Reg. No. 51,897

Frank J. DeRosa, Reg. No. 26,543

Pamela G. Maher, Reg. No. 40,712

Ivan Posey, Reg. No. 43,865

Brooke W. Quist, Reg. No. 45,030

Monica Wingham, Reg. No. 46,790

Todd Holmbo, Reg. No. 42,665

SEND CORRESPONDENCE TO:

Brown Raysman Millstein Felder & Steiner LLP

163 Madison Avenue, P.O. Box 1989

Morristown, New Jersey 07962-1989

DIRECT TELEPHONE CALLS TO:

Leslie Gladstone Restaino, Esq.

(973) 775-8930

Attorney Docket No. 5333-4

# DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

## SOLE OR JOINT

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

NAME OF SOLE OR FIRST INVENTOR: PAGANI, Giovanni

INVENTOR'S SIGNATURE

RESIDENCE

CITIZENSHIP

POST OFFICE ADDRESS

Novazzano, Switzerland

Switzerland

via Boschetto 31

6883 Novazzano

Switzerland

NAME OF ADDITIONAL JOINT  
INVENTOR, IF ANY:

INVENTOR'S SIGNATURE

RESIDENCE

CITIZENSHIP

POST OFFICE ADDRESS

NAME OF ADDITIONAL JOINT  
INVENTOR, IF ANY:

INVENTOR'S SIGNATURE

RESIDENCE

CITIZENSHIP

POST OFFICE ADDRESS

NAME OF ADDITIONAL JOINT  
INVENTOR, IF ANY:

INVENTOR'S SIGNATURE

RESIDENCE

CITIZENSHIP

POST OFFICE ADDRESS

NAME OF ADDITIONAL JOINT  
INVENTOR, IF ANY:

INVENTOR'S SIGNATURE

RESIDENCE

CITIZENSHIP

POST OFFICE ADDRESS